Substitute for form 1449A&B/PTO				Complete if Known		
				Application Number	10/091,606	
INFO	RMATION DIS	CLOS	URE	Filing Date	March 4, 2002	
STATEMENT BY APPLICANT (Use as many sheets as necessary)				First Named Inventor	Winking, Brad K.	
				Art Unit	3694	
				Examiner Name	Martin A. Gottschalk	
Sheet	1	of	1	Attorney Docket Number	020375-005700US	

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Examiner Initials*	Cite No.1	Document Number Number Kind Code ^{2 (f incom)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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NON PATENT LITERATURE DOCUMENTS						
	Examiner Initials *	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, senial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or ocutiny where published.	T²		

Examiner Signature	Date Considered	

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